United States of America

Department of Transportation—Jederal Aviation Administration

Supplemental Type Certificate

Number SA43215W

Project No. STG-9001

This certificate, issued to

Paul W. Collins Route 1, Box 163 B-4 Alamo, Texas 78516

certifies that the change in the type design for the following product with the limitations and conditions

therefor as specified hereon meets the airworthiness requirements of Part 8 of the Civil Air

Regulations.

Original Product - Type Certificate Number: A45W

Make: Ayers
Model: S-2R, S-2C, S-2D

Description of Type Design Change:

Installation of wind driven freon air conditioning unit in accordance with CAD-3000 Drawing List Revision B dated 9/26/83 and CAD-3009A Installation Instructions dated 4/21/83, or installation of a freen air conditioning unit in accordance with CAD Drawing 2000, Revision G, dated 8/28/85 and CAD instructions dated 8/25/85 or later FAA approved revisions.

Limitations and Conditions:

Compatibility of this modification with other previously approved modifications must be determined by the installer.

This certificate and the supporting data which is the basis for approval shall remain in effect until surrendered, suspended, revoked, or a termination date is otherwise established by the Administrator of the Federal Aviation Administration.

Date of application: March 11, 1981

Date reissued:

Date of issuance:

April 7, 1981

Date amended: 1/4/84; 8/19/86, 1/20/87

By direction of the Administrator

For L. B. Andriesen (Signature)

Manager, Aircraft Certification Division Southwest Region

Any alteration of this certificate is punishable by a fine of not exceeding \$1,000, or imprisonment not exceeding 3 years, or both.

INSTRUCTIONS: The transfer endorsement below ma	y be used to notify	the appropriate	FAA Regional	Office of
the transfer of this Supplemental Type Certificate.			- C	

The FAA will reissue the certificate in the name of the transferee and forward it to him.

TRANSFER ENDORSEMENT

Transfer the ownership of Supplemental Type Ce	rtificate Number	
to (Name of transferee)		
(Address of transferee)	(Number and street)	
	(City, State, and ZIP code)	
from (Name of grantor) (Print or type)		
(Address of grantor)		
	(Number and street)	
-		
	(City, State, and ZIP code)	
The second secon		
Extent of Authority (if licensing agreement):		
Date of Transfer:		
Date of Transfer.		
Signature of grantor (In ink):		